70/5/8628 Docket No.: ___

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor(s), I/We hereby declare that: My/Our residence, mailing address, and citizenship is/are as stated below next to my/our name. I/We believe I/we am/are the original, first and sole inventor or an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FACTORS AND OF A BIOLOGICAL M		D/II1301106 A				
the application of which is attached hereto	OR	United States . Number _PCT	n _December 20, 2 Application Numb VEP2003/006509, ber 20, 2004	er or PCT In and was ame	nded on	Application
I/We hereby state that I/we have reviewe amended by any amendment specifically r	ed and understar	nd the contents of	the above identifi	ed application	on, includi	ng the claims,
I/We acknowledge the duty to disclose in Continuation-In-Part application(s), mater the national of PCT international filing date	information whi	ch is material to which became ava	ailable between the	efined in 37 e filing date	C.F.R. 1.5	56, including for application as
I/We hereby claim foreign priority under plant breeder's rights certificate(s), or 365 the United States of America, listed below inventor's or plant breeder's rights certif application on which priority is claimed.	35 U.S.C. 119(a) of any PCT v and have also	a)-(d) or (f), or 36 international applited below, 1	5(b) of any foreign cation(s) which de by checking the bo	esignated at l	east one co	ountry other th
Prior Application Number(s)	Count	rv	Filing Date		Priority	
Prior Application Number(s) 102 27 611.0	Count DE	ry	Filing Date June 20, 2002		Priority Yes X	Claimed No
		ry			Yes	No
102 27 611.0	DE	ry 	June 20, 2002	 	Yes X	No □
102 27 611.0	DE	ry	June 20, 2002	 	Yes X X	No
102 27 611.0	DE		June 20, 2002 July 26, 2002		X X	No
102 27 611.0 102 34 204.0 I/We hereby claim benefit under 35 United	DE		June 20, 2002 July 26, 2002 ed States provision		X X	No
102 27 611.0 102 34 204.0 I/We hereby claim benefit under 35 United	d States Code §1 and States Code §2 and States Code §3 and States Code §4 and States Code §5 and States Code §6 and States Code	119(e) of any United and, insofar as the ational application y to disclose any i	June 20, 2002 July 26, 2002 ed States provision Filing I States application e subject matter of in the manner pro information materi	g Date o(s) or §365(each of the covided by the al to the pate	Yes X X In(s) listed c) of any F claims of the first paragentability of	No D D D D D D D D D D D D D D D D D D

• I/We hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my/our attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

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PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

	NAME OF SOLE OR FIRST INVENTOR:								
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ן	Inventor's Signature X Hugier 1 109 13		odi Datex		Mm1(9,1005				
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	Inventor's Signature		Date						
.:XX	Residence: City	State	Country		Citizenship				
	Mailing Address:			*****	•				
	City	State	Zip		Country				
	NAME OF THIRD INVENTOR:	·							
	Given Name (first and middle [if any])		Family Name or Sumam	ıc_	•				
	Inventor's Signature		Date						
	Residence: City	State	Country		Citizenship				
	Mailing Address:								
	City	State	Zip		Country				
NAME OF FOURTH INVENTOR:									
	Given Name (first and middle [if any])	·	Family Name or Suman	nily Name or Sumame					
	Inventor's Signature		Date		•				
	Residence: City	State	Country		Citizenship				
Mailing Address:									
	City	State	Zip		Country				
	NAME OF FIFTH INVENTOR:								
	Given Name (first and middle [if any])		Family Name or Surname						
	Inventor's Signature		Date						
	Residence: City	State	Country		Citizenship				
	Mailing Address:	•							
	City	State	Zip		Country				
	NAME OF SIXTH INVENTOR:								